

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy ability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date Of Report	05/03/2018 16:42
Date Of Accident	03/03/2018 14:40
Exact Location Of Accident	ALONG WOODLANDS AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL1167R
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	REPORTING@AUTOINSURE.COM.SG
Mobile Phone No	
Alternative Phone No	Office-31572626

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	ATTRAGE-1.2 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	UBER
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995011
Cover Note Number	

Driver

Name of Driver	PANG SI WEI (PAN SIWEI)
NRIC No	S8225964C
Date Of Birth	13/08/1982
Occupation	OUTDOOR
Date Of Driving Pass	29/09/2003
Driving Experience	14 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88212626
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	6 MARSILING LANE
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	Name: : CASPER Gender: : Male
Passenger 2	Name: : LIM RUI CHEN Gender: : Female

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB9496J
Vehicle Make/Model/Colour	NISSAN / VAN / BLACK
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SHAWN LEE YUAN CHENG
NRIC/Passport Number	S9625198Z
Contact Number	93873870
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHA3232C
Vehicle Make/Model/Colour	TOYOTA / BLUE
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	MR NG
NRIC/Passport Number	
Contact Number	91831142
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20180304/7008

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20180304/7008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/03/2018 16:28	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: PANG SI WEI		Address:	
ID Type / ID No.: NRIC NO / S8225964C		Contact No.: Home/Office: Mobile:	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 35	Date of Birth: 13/08/1982	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: UNEMPLOYED		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/03/2018 14:40	Type of Location: Straight Road
Location: WOODLANDS AVENUE 3				
Weather: Sunny		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBB9496J	Van	NISSAN		Black		0
SHA3232C	Car	TOYOTA		Blue		0
SLL1167R	Car	MITSUBISHI		White		2

Sketch Plan #2



**SINGAPORE
POLICE FORCE**



T/20180304/7008

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20180304/7008

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Shawn Lee Yuan Cheng	ID No.	S9625198Z
Related Vehicle	GBB9496J (Van)	Contact No.	93873870
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	PANG SI WEI	ID No.	S8225964C
Related Vehicle	SLL1167R (Car)	Contact No.	
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	03/03/2018	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

As i turn left to the main road woodland ave 3, I saw a taxi parking stationary at bus lane. I have stopped my car signal right intended to inch out and switch lane. At this moment a vehicle had crashed on my back of my car with a great impact.

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180304/7008

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20180304/7008

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
04/03/2018 16:28

Classification Of Case:

Sketch Plan #4


SKETCH PLAN

IMPORTANT NOTICE

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
 - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


Policyholder's Signature
Date & Time:


Driver's Signature
(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

A: SLL1167R
B: GBB9496J
C: SHW3232C

Refer to police report: T/20180304/7008

I/We declare the foregoing particulars are true in every respect.

Driver's Signature _____ 05/03/18 4.16pm
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8225964C



Name

PANG SI WEI
(PAN SIWEI)

潘思卫

Race

CHINESE

Date of birth

13-08-1992

Sex

M

Country/Place of birth

SINGAPORE

S8225964C

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S8225964C
Name:

PANG SI WEI
(PAN SIWEI)

Birth Date: 13 Aug 1992

Issue Date: 14 Apr 2008



001591566F

5184670



NRIC No: S8225964C



Date of issue
08-06-2013

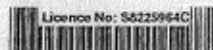
Address

APT BLK 349 WOODLANDS AVENUE 3
#08-53
SINGAPORE 730349

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS/ES

PASS DATE

Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg 29 Sep 2003



Licence No: S8225964C

NP 4284

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



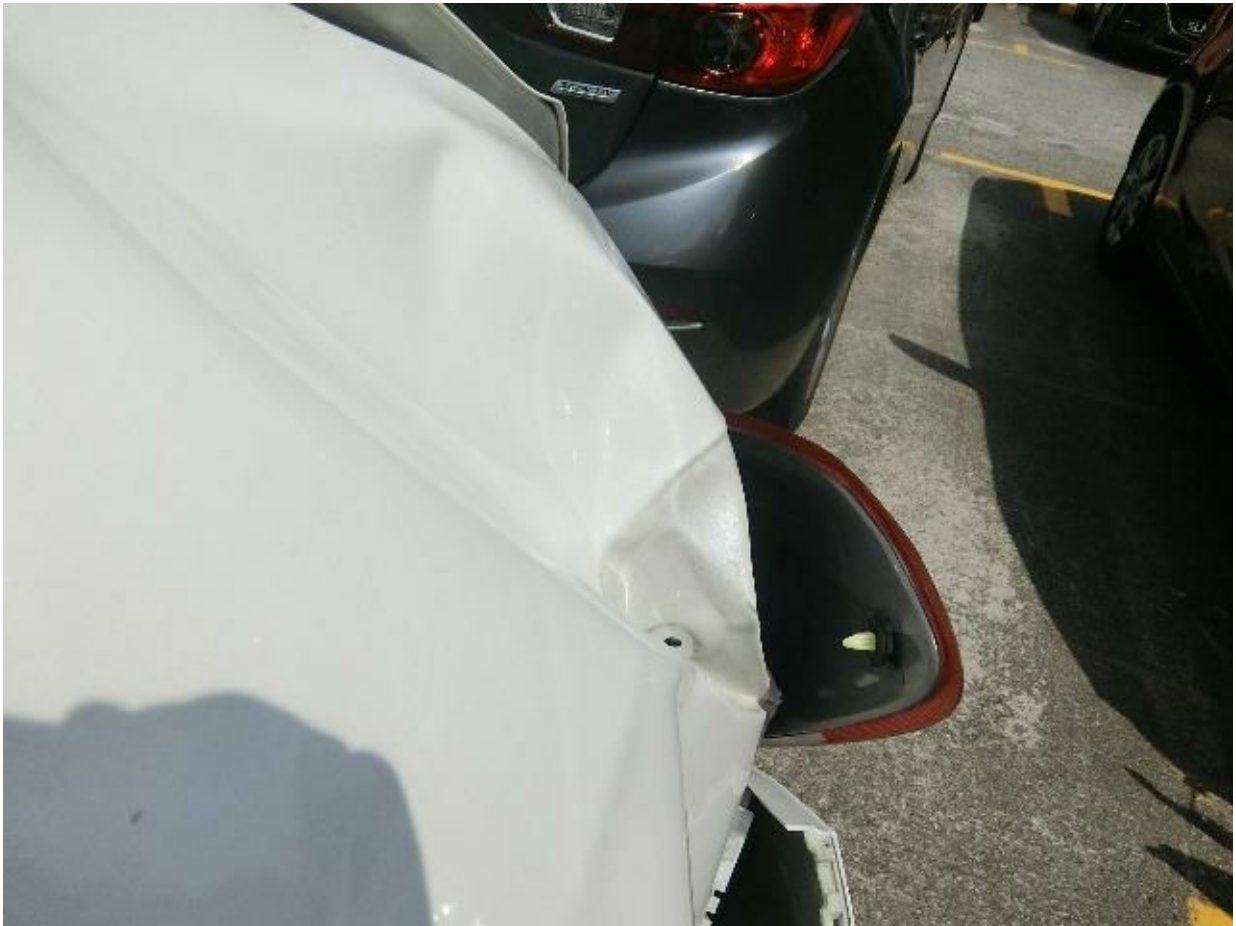
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